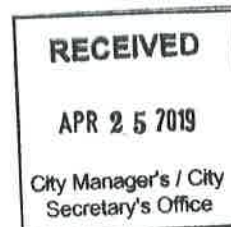


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>16</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr.</b>	FIRST <b>Jesse</b>	MI <b>L</b>
	NICKNAME	LAST <b>Davis</b>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>PO Box 2671 Denton TX 76202</b>		
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE: <b>(817)</b> PHONE NUMBER: <b>253-1132</b> EXTENSION:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mrs.</b>	FIRST <b>Ann</b>	MI
	NICKNAME	LAST <b>Smith</b>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>2013 Cindy Lane Denton, TX 76207</b>		
	8 CAMPAIGN TREASURER PHONE AREA CODE: <b>(940)</b> PHONE NUMBER: <b>453-7424</b> EXTENSION:		
9 REPORT TYPE			
<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED			
Month Day Year <b>3 / 26 / 2019</b> THROUGH    Month Day Year <b>4 / 24 / 2019</b>			
11 ELECTION		ELECTION TYPE	
ELECTION DATE Month Day Year <b>5 / 4 / 2019</b>		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE OFFICE HELD (if any) <b>none</b>		13 OFFICE SOUGHT (if known) <b>Denton City Council, District 3</b>	



GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Jerre Davis

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ all itemized

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 4,860.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,  
UNLESS ITEMIZED

\$ All itemized

4. TOTAL POLITICAL EXPENDITURES

\$ 12,945.60

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

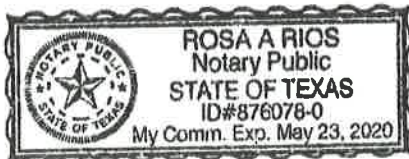
\$ 2,905.46

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jerre Davis, this the 25<sup>th</sup>  
day of April, 20 19, to certify which, witness my hand and seal of office.

Rosa A. Rios  
Signature of officer administering oath

Rosa A. Rios  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

*Terre Davis*

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>4,860.00</i>
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>10,877.14</i>
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>2,060.68</i>
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>7.78</i>
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7</b>
2 FILER NAME <b>Jesse Davis</b>		3 Filer ID (Ethics Commission filers)
4 Date <b>4/2/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marky Rivers</b> 6 Contributor address; City; State; Zip Code <b>100 W. Mulberry #200 Denton, TX 76201</b>	7 Amount of contribution (\$) <b>\$100</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/2/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amy Griffin</b> Contributor address; City; State; Zip Code <b>8912 Crestview Dr. Denton, TX 76201</b>	Amount of contribution (\$) <b>\$500</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/2/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rick Hagen</b> Contributor address; City; State; Zip Code <b>100 W. Oak St. Denton, TX 76201</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/2/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cary Piel</b> Contributor address; City; State; Zip Code <b>100 W. Oak St. Denton, TX 76201</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/14	5 Full name of contributor Daniel Abasolo <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 907 V. Congress Denton, TX 76201	7 Amount of contribution (\$) \$100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/2/14	Full name of contributor Jill Jester <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 2106 Stonegate Dr. Denton, TX 76205	Amount of contribution (\$) \$100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/14	Full name of contributor J. G. Fykes <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code PO 51261 Denton, TX 76206	Amount of contribution (\$) \$500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/14	Full name of contributor Lance Vanzant <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1317 Hunter Ln. Celina, TX 75004	Amount of contribution (\$) \$250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Krenger	7 Amount of contribution (\$) \$50
6 Contributor address; City; State; Zip Code 3905 Deer Forest Denton, TX 76208		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/3/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elma Walker	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code P.O. Box 856 Denton, TX 76202		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/3/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Johnson	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 616 E. Hickory Denton, TX 76205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/4/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Duplantis	Amount of contribution (\$) \$150
Contributor address; City; State; Zip Code 10100 Parkerest Ct. Denton, TX 76207		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/14	5 Full name of contributor TG Jeffrey <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 9808 Grandview Denton, TX 76207	7 Amount of contribution (\$) \$200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/7/14	Full name of contributor Tommy Carnkless <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 209 Ridgecrest Cir. Denton, TX 76205	Amount of contribution (\$) \$500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/14	Full name of contributor Edward <del>PAKULNIEWICZ</del> Pakulniewicz <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 8104 Sanderling Dr. Denton, TX 76207	Amount of contribution (\$) \$50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/14	Full name of contributor Stephan Alexander <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 13391 George Foster Rd. Ponder, TX 76259	Amount of contribution (\$) \$475.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7</b>
2 FILER NAME <b>Jesse Davis</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/13/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Roger White</b> 6 Contributor address; City; State; Zip Code <b>9401 Trailwood Dr. Denton, TX 76207</b>	7 Amount of contribution (\$) <b>\$100</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/13/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Walter Searcey</b> Contributor address; City; State; Zip Code <b>12516 Marl Way Denton, TX 76207</b>	Amount of contribution (\$) <b>\$50</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Joyce Ambre</b> Contributor address; City; State; Zip Code <b>10200 Countryside Dr. Denton, TX 76201</b>	Amount of contribution (\$) <b>\$25</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>William Dodge</b> Contributor address; City; State; Zip Code <b>12209 Grosheak Dr. Denton, TX 76207</b>	Amount of contribution (\$) <b>\$40</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/15/14	5 Full name of contributor Brian Burns <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 9612 Greystone Way Denton, TX 76207	7 Amount of contribution (\$) \$20
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/18/14	Full name of contributor Bruce Isaacks <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1701 N. Locust Denton, TX 76201	Amount of contribution (\$) \$200
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/18/14	Full name of contributor Nathan Miller <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1117 Wilson Dr. Denton, TX 76226	Amount of contribution (\$) \$200
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/21/14	Full name of contributor Charles Heflin <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 440 L. St. NW Washington, DC 20001	Amount of contribution (\$) \$100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7</b>
2 FILER NAME <b>Jose Davis</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/22/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael Marshall</b> 6 Contributor address; City; State; Zip Code <b>2892 Marshall Rd. Denton, TX 76207</b>	7 Amount of contribution (\$) <b>\$500</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/24/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marc Moffitt</b> Contributor address; City; State; Zip Code <b>2708 Crater Lake Denton TX 76210</b>	Amount of contribution (\$) <b>\$250</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/ Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>2</b>		2 FILER NAME <b>Jesse Davis</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>3/26/19</b>		5 Payee name <b>Thin Line Film Festival</b>			
6 Amount (\$) <b>\$250.00</b>		7 Payee address; City; State; Zip Code <b>207 W. Hickory #311 Denton, TX 76201</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/13/19</b>		Payee name <b>Pay Pal</b>			
Amount (\$) <b>\$100.49</b>		Payee address; City; State; Zip Code <b>2211 N. First St. San Jose, CA 95131</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Accounting / Banking</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/9/19</b>		Payee name <b>Chase Bank</b>			
Amount (\$) <b>\$10,500</b>		Payee address; City; State; Zip Code <b>Po Box 6294 Carol Stream, IL 60197</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Credit Card Payment</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>2</u>	<b>2</b> FILER NAME <u>Jesse Davis</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>4/24/14</u>	<b>5</b> Payee name <u>Pay Pal</u>	
<b>6</b> Amount (\$) <u>\$26.65</u>	<b>7</b> Payee address; City; State; Zip Code <u>2211 N. First St. San Jose, CA 95131</u>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule)  <u>Accounting / Banking</u>	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought      Office held
Amount (\$)	Payee name	Payee address; City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought      Office held
Amount (\$)	Payee name	Payee address; City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	Office sought      Office held
Amount (\$)	Payee name	Payee address; City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: <b>3</b>	2 FILER NAME <b>Jesse Davis</b>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ <b>0</b>
5 Date <b>4/2/19</b>	6 Payee name <b>Wal-Mart</b>	
7 Amount (\$) <b>\$8.83</b>	8 Payee address; City; State; Zip Code <b>2750 W. University Dr. Denton, TX 76201</b>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Office Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name _____ Office sought _____ Office held _____		
Date <b>4/3/19</b>	Payee name <b>Chase</b>	
Amount (\$) <b>\$194.36</b>	Payee address; City; State; Zip Code <b>PO Box 6294 Carol Stream, IL 60197</b>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name _____ Office sought _____ Office held _____		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: <div style="text-align: center; font-size: 1.5em;">3</div>	<b>2</b> FILER NAME <i>Jerse Davis</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ <div style="text-align: center; font-size: 1.5em;">X</div>
<b>5</b> Date <div style="text-align: center; font-size: 1.5em;">4/16/19</div>	<b>6</b> Payee name <div style="text-align: center; font-size: 1.5em;">Vista Print</div>	
<b>7</b> Amount (\$) <div style="text-align: center; font-size: 1.5em;">\$77.49</div>	<b>8</b> Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.5em;">95 Hayden Ave. Lexington, MA 02421</div>	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.5em;">Printing Expense</div>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date <div style="text-align: center; font-size: 1.5em;">4/18/19</div>	Payee name <div style="text-align: center; font-size: 1.5em;">USPS</div>	
Amount (\$) <div style="text-align: center; font-size: 1.5em;">\$55.00</div>	Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.5em;">101 E. McKinney Denton, TX 76201</div>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.5em;">office Expense</div>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above).

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 3		2 FILER NAME Jesse Davis		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$ 0	
5 Date 4/18/14		6 Payee name Denton Record Chronicle			
7 Amount (\$) \$1720.00		8 Payee address; City; State; Zip Code 3555 Duchess Dr. Denton, TX 76205			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name		Office sought	
Payee name		Office held			
Amount (\$)		Payee address; City; State; Zip Code			
TYPE OF EXPENDITURE		<input type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: <div style="text-align: center; font-size: 1.5em;">1</div>	<b>2</b> FILER NAME <div style="text-align: center; font-size: 1.2em;">Jesse Davis</div>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <div style="text-align: center; font-size: 1.2em;">4/15/14</div>	<b>5</b> Payee name <div style="text-align: center; font-size: 1.2em;">Lowes</div>	
<b>6</b> Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$ 7.78</div> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">1255 S. Loop 288 Denton, TX 76205</div>	
<b>8</b> <div style="text-align: center;"><b>PURPOSE OF EXPENDITURE</b></div>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.2em;">Office Expense</div>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Office sought	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Office sought	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Office sought	Office held	

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